

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF

In re Nicholas V. Campanella  
Debtor

Case No. 16-21185-VFP  
Reporting Period: December, 2016

Social Security # XXX-XX-1243  
(last 4 digits only)

MONTHLY OPERATING REPORT  
(INDIVIDUAL WAGE EARNERS)

File with the Court and submit a copy to the United States Trustee within 20 days after the end of the month and submit a copy of the report to any official committee appointed in the case.  
(Reports for Rochester and Buffalo Divisions of Western District of New York are due 15 days after the end of the month, as are the reports for Southern District of New York.)

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1 (INDV)	Yes	No
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1 (CONT)	Yes	Yes
Copies of bank statements		Yes	Yes
Disbursement Journal	MOR-2 (INDV)	Yes	No
Balance Sheet	MOR-3 (INDV)	No	No
Copies of tax returns filed during reporting period		No	No
Summary of Unpaid Post-petition Debts	MOR-4 (INDV)	Yes	No
Status of Secured Notes, Leases, Installment Payments	MOR-5 (INDV)	No	No
Debtor Questionnaire	MOR-6 (INDV)	Yes	No

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.

Signature of Debtor

*Nicholas V. Campanella*

Date

6/19/17

Signature of Joint Debtor

Date

In re Nicholas V. Campanella  
Debtor

Case No. 16-21185-VFP  
Reporting Period: **xxx-xx-1243**

**INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS**

(This Form must be submitted for each bank account maintained by the Debtor)

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account. [See MOR-1 (CONT)]

	Current Month Actual	Cumulative Total (to Date) Actual
<b>Cash - Beginning of Month</b>	\$ 152,353.95	
<b>RECEIPTS</b>		
Wages (Net)	\$ 11,531.72	\$71,825.18
Interest and Dividend Income	5.03	\$30.91
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets		
Other Income (attach schedule)	\$18,190.24	\$273,504.87
<b>Total Receipts</b>	\$ 29,726.99	\$345,360.96
<b>DISBURSEMENTS</b>		
<b>ORDINARY ITEMS:</b>		
Mortgage Payment(s)	\$7,465.79	\$44,654.24
Rental Payment(s)	\$285.00	\$1,285.00
Other Secured Note Payments	\$588.81	\$4,215.85
Utilities	\$883.86	\$6,122.43
Insurance		
Auto Expense		\$48.00
Lease Payments		
IRA Contributions		
Repairs and Maintenance		\$146.53
Medical Expenses	\$179.68	\$284.48
Food, Clothing, Hygiene	\$1,277.43	\$8,958.54
Charitable Contributions		\$15.00
Alimony and Child Support Payments		
Taxes - Real Estate		\$7,876.87
Taxes - Personal Property		
Taxes - Other (attach schedule)		\$80,000.00
Travel and Entertainment	\$327.14	\$3,622.95
Gifts	\$42,555.52	\$54,865.52
Other (attach schedule)	\$13,124.75	\$88,840.21
<b>Total Ordinary Disbursements</b>	\$66,687.98	\$300,935.62
<b>REORGANIZATION ITEMS:</b>		
Professional Fees		
U. S. Trustee Fees		
Other Reorganization Expenses (attach schedule)		
<b>Total Reorganization Items</b>		
<b>Total Disbursements (Ordinary + Reorganization)</b>	\$ 66,687.98	\$300,935.62
<b>Net Cash Flow (Total Receipts - Total Disbursements)</b>	(36,960.99)	\$44,425.34

In re Nicholas V. Campanella

Case No. 16-21185-VFP

Debtor	Reporting Period: xxx-xx-1243
Cash - End of Month (Must equal reconciled bank statement)	\$ 115,392.96

**INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS**  
(continuation sheet)

BREAKDOWN OF "OTHER" CATEGORY	Current Month Actual	Cumulative Filing to Date Actual
<b>Other Income</b>		
Legal order reversal		\$274.28
Legal order reversal		\$125.00
Bank transfer to close previous account		\$350.00
Medical Insurance Refund		\$153.77
Credit Card Activitiy		\$2,858.78
Rent belonging to MCN Properties - deposited by mistake		\$39,781.09
Phoenix Medical Director Fees for Dr. Campanella	\$950.24	\$47,506.41
Distribution from Montclair Physicians Group, LLC		\$97,050.00
Distribution from Affiliates	\$17,240.00	\$85,405.54
<b>Other Taxes</b>		
<b>Other Ordinary Disbursements</b>		
Gina Campanella - reimbursement of expenses		\$150.00
Gina Campanella - reimbursement of expenses		\$320.00
Credit Cards Payable	\$843.73	\$2,309.38
Repairs & Maintenance		\$365.27
Family Contribution to Gina from Marie		\$40,000.00
Charitable Contributions	\$450.00	\$700.00
Capital Contribution to MCN Properties		\$30,000.00
Pilgrim Medical - Loan	\$9,000.00	\$9,000.00
Family Contribution to Joseph from Marie	\$2,831.02	\$5,662.04
<b>Other Reorganization Expenses</b>		

**THE FOLLOWING SECTION MUST BE COMPLETED**

DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)

<b>TOTAL DISBURSEMENTS</b>	\$66,508.29
LESS: TRANSFERS TO OTHER DEBTOR IN POSSESSION ACCOUNTS	
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	

In re Nicholas V. Campanella

Case No. 16-21185-VFP

Debtor

Reporting Period: xxx-xx-1243

TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES	\$66,508.29
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In re Nicholas V. Campanella  
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Case No. 16-21185-VFP  
Reporting Period: **xxx-xx-1243**

### DISBURSEMENT JOURNAL

#### CASH DISBURSEMENTS

Date	Payee	Purpose	Amount
11/29/16	Verizon	Utilities	\$ 234.04
11/30/16	Chase Card Services	Chase	\$ 500.00
11/30/16	Joseph Alfano	Rent	\$ 200.00
12/1/16	Joseph Alfano	Family Contribution	\$ 2,831.02
12/2/16	PSE&G	Utilities	\$ 170.36
12/5/16	Joseph Alfano	Rent	\$ 20.00
12/5/16	Joseph Alfano	Rent	\$ 60.00
12/5/16	Joseph Alfano	Rent	\$ 5.00
12/6/16	Paypal	Entertainment	\$ 14.50
12/14/16	Chase Card Services	Chase	\$ 2,000.00
12/21/16	Verizon	Utilities	\$ 202.96
Total Cash Disbursements			\$ 6,237.88

#### BANK ACCOUNT DISBURSEMENTS

Date	Payee	Purpose	Amount	Check #
11/29/16	Associated Family	Medical	\$ 169.00	583
12/1/16	BOA Loc	Line of Credit	\$ 588.81	633
11/29/16	Borough of Sea Girt	Utilities	\$ 276.50	635
12/1/16	Elissa Hyde	Gifts	\$ 14,000.00	636
12/1/16	Cinna Hyde	Gifts	\$ 14,000.00	637
12/1/16	Julia Coppo	Gifts	\$ 14,000.00	638
12/8/16	M&T Bank	Mortgage	\$ 7,465.79	639
12/8/16	Kids Helping Kids	Contribution	\$ 450.00	640
12/9/16	Norma & Carmine Alfano	Gifts	\$ 500.00	642
12/19/16	Pilgrim Medical Center	Loan	\$ 9,000.00	646
Total Bank Account Disbursements			\$ 60,450.10	

Total Disbursements for the Month	\$ 66,687.98
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Nicholas V. Campanella  
Debtor

Case No. 16-21185-VFP  
Reporting Period: xxx-xx-1243

### STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero.  
Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes.  
Attach photocopies of any tax returns filed during the reporting period.

	Beginning Tax Liability	Amount Withheld or Accrued	Amount Paid	Date Paid	Check No. or EFT	Ending Tax Liability
<b>Federal</b>						
Withholding	\$0.00	\$3,294.74	\$3,294.74			\$0.00
FICA-Employee	\$0.00	\$232.00	\$232.00			\$0.00
FICA-Employer	\$0.00	\$0.00	\$0.00			\$0.00
Unemployment	\$0.00	\$0.00	\$0.00			\$0.00
Income	\$0.00	\$0.00	\$0.00			\$0.00
Other:						
Total Federal Taxes	\$0.00	\$3,526.74	\$3,526.74			\$0.00
<b>State and Local</b>						
Withholding	\$0.00	\$941.54	\$941.54			\$0.00
Sales	\$0.00	\$0.00	\$0.00			\$0.00
Excise	\$0.00	\$0.00	\$0.00			\$0.00
Unemployment	\$0.00	\$0.00	\$0.00			\$0.00
Real Property	\$0.00	\$0.00	\$0.00			\$0.00
Personal Property	\$0.00	\$0.00	\$0.00			\$0.00
Other:						
Total State and Local		\$941.54	\$941.54			
<b>Total Taxes</b>	\$0.00	\$4,468.28	\$4,468.28			\$0.00

### SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

	Number of Days Past Due					Total
	Current	0-30	31-60	61-90	Over 90	
Accounts Payable	0					0
Wages Payable	0					0
Taxes Payable	0					0
Rent/Leases-Building	0					0
Rent/Leases-Equipment	0					0
Secured Debt/Adequate Protection Payments	0					\$0.00
Professional Fees	0					0
Amounts Due to Insiders*	0					0
Other: Condo Fees						
Other: Mortgage						
<b>Total Postpetition Debts</b>	0					\$0.00

Explain how and when the Debtor intends to pay any past-due postpetition debts.

\*"Insider" is defined in 11 U.S.C. Section 101(31).

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### DEBTOR QUESTIONNAIRE

Must be completed each month. If the answer to any of the questions is "Yes", provide a detailed explanation of each item. Attach additional sheets if necessary.		Yes	No
1	Have any funds been disbursed from any account other than a debtor in possession account this reporting period?		X
2	Is the Debtor delinquent in the timely filing of any post-petition tax returns?		X
3	Are property insurance, automobile insurance, or other necessary insurance coverages expired or cancelled, or has the debtor received notice of expiration or cancellation of such policies?		X
4	Is the Debtor delinquent in paying any insurance premium payment?		X
5	Have any payments been made on pre-petition liabilities this reporting period?		X
6	Are any post petition State or Federal income taxes past due?		X
7	Are any post petition real estate taxes past due?		X
8	Are any other post petition taxes past due?		X
9	Have any pre-petition taxes been paid during this reporting period?		X
10	Are any amounts owed to post petition creditors delinquent?		X
11	Have any post petition loans been received by the Debtor from any party?		X
12	Is the Debtor delinquent in paying any U.S. Trustee fees?		X
13	Is the Debtor delinquent with any court ordered payments to attorneys or other professionals?		X



P.O. Box 15284  
Wilmington, DE 19850

MARIE T CAMPANELLA  
384 SUNSET BLVD  
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## Preferred Rewards

### Customer service information

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Please see the Account Changes section of your statement for details regarding important changes to your account.

## Your BofA Core Checking Preferred Rewards Platinum Honors

for November 24, 2016 to December 23, 2016

Account number: 1159

MARIE T CAMPANELLA

### Account summary

Beginning balance on November 24, 2016	\$23,201.79
Deposits and other additions	71,371.96
Withdrawals and other subtractions	-20,237.88
Checks	-60,450.10
Service fees	-0.00

**Ending balance on December 23, 2016** **\$13,885.77**

Your account has overdraft protection provided by deposit account number  
0040 9020 5922.

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## Your checking account

MARIE T CAMPANELLA | Account #

1159 | November 24, 2016 to December 23, 2016

### Deposits and other additions

Date	Description	Amount
11/29/16	Online Banking transfer from SAV 5922 Confirmation# 2444301305	42,000.00
11/30/16	PILGRIM MEDICAL DES:DIRECT DEP ID:675046360538GH8 INDN:CAMPANELLA,MARIE CO ID:9111111101 PPD	5,765.86
11/30/16	PHOENIX HEALTH M DES:QUICKBOOKS ID:XXXXXXXXX INDN:CAMPANELLA, M.D., NICH CO ID:1722616653 PPD	950.24
12/05/16	BKOFAMERICA MOBILE 12/03 3501630741 DEPOSIT *MOBILE NJ	8,550.00
12/14/16	PILGRIM MEDICAL DES:DIRECT DEP ID:935301680013GH8 INDN:CAMPANELLA,MARIE CO ID:9111111101 PPD	5,765.86
12/19/16	BKOFAMERICA MOBILE 12/17 3506125541 DEPOSIT *MOBILE NJ	8,340.00
<b>Total deposits and other additions</b>		<b>\$71,371.96</b>

### Withdrawals and other subtractions

Date	Description	Amount
11/29/16	VERIZON COMMUNICATIONS Bill Payment	-234.04
11/30/16	CHASE CREDIT CARDS Bill Payment	-500.00
11/30/16	Online scheduled transfer to CHK 2412 Confirmation# 1098532397	-200.00
12/01/16	TFCU/Joseph Alfano Bill Payment	-2,831.02
12/02/16	PSE&G Bill Payment	-170.36
12/05/16	Online Banking transfer to CHK 2412 Confirmation# 3480481780	-20.00
12/05/16	Online Banking transfer to CHK 2412 Confirmation# 3394226936	-60.00
12/05/16	Online Banking transfer to CHK 2412 Confirmation# 3296421879	-5.00
12/06/16	PAYPAL DES:INST XFER ID:TWEENBRANDS INDN:MARIE CAMPANELLA CO ID:PYPALS177 WEB	-14.50
12/07/16	Online Banking transfer to SAV 5922 Confirmation# 2411153479	-14,000.00
12/14/16	CHASE CREDIT CARDS Bill Payment	-2,000.00
12/21/16	VERIZON COMMUNICATIONS Bill Payment	-202.96
<b>Total withdrawals and other subtractions</b>		<b>-\$20,237.88</b>

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SSM-09-16-0091.B | ARFPV669

## Account Changes

We want to make sure you stay up-to-date on changes to your accounts.

### Reminder about overdraft policies for your account (this is not a change).

These are important things you should know about debit card transactions and how your account can become overdrawn. This does not change your debit card, the overdraft policies on your debit card, or the agreements governing your account. Instead this is a reminder intended to help you avoid overdraft fees on recurring debit card transactions.

### Knowing how debit card transactions work is important to help avoid overdrafts and overdraft fees

#### How debit card transactions work

1. First, you authorize a transaction.

A transaction is authorized when a merchant with whom you use your card or to whom you previously provided your information asks Bank of America to approve a transaction you want to make. At this time, in order for the transaction to go through, Bank of America must promise the merchant to pay for the purchase upon the merchant's request.

2. Next, we may place a hold on the funds.

A hold immediately reduces the available funds in your account by the amount of the authorization request. If, while the hold is in place, you do not have enough available funds in your account to cover other transactions you may have conducted (such as a check you previously wrote), those items may overdraw your account or be returned unpaid.

In most cases, the hold expires when the transaction is paid.

The amount being held is not applied to the debit card transaction or to any specific transaction. If the hold expires and the transaction has not been paid, the amount being held is returned to your available funds. After the hold expires, we determine whether you have sufficient funds available to pay the debit card transaction. If you do not have sufficient funds, the debit transaction will cause you to overdraw and, if it is a recurring transaction, may incur an overdraft fee. This can occur even if your account did have sufficient available funds when the merchant requested authorization.

3. Finally, we pay the transaction.

Your transaction is paid when the merchant presents it to Bank of America for payment — that is, when the merchant asks us to transfer the funds from your account to the merchant. It is important to note that authorization and payment of debit card transactions do not occur simultaneously — there can be days between.

If other account activity has caused the funds available in your account to drop below zero before the debit card transaction is paid, you may no longer have sufficient funds to pay the merchant. If that occurs, the debit card transaction will overdraw your account because we must honor our promise to pay the merchant.

- Your available funds may change between the time you authorize a transaction and when the transaction is paid. For example, on Monday we authorize a debit card transaction because you have enough available funds at the time. A hold is then placed on your funds until the merchant presents the transaction for payment. On Tuesday we process and post another transaction (such as a check you wrote) that reduces your available funds below zero. If the merchant presents the original debit card transaction for payment on Wednesday, and your available funds are now below the amount needed to pay the transaction, the debit card transaction will overdraw your account and you may incur an overdraft fee.
- Bank of America does not charge overdraft fees for every type of transaction. If the debit card transaction described in the example is an everyday, non-recurring transaction (such as a one-time purchase of groceries), we will not charge you an overdraft fee. However, if the transaction is recurring, (such as a monthly gym membership) you may incur an overdraft fee. The Personal Schedule of Fees and Deposit Agreement for your account provide more information about Bank of America's overdraft fees.

Continued on next page



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Wilmington, DE 19850

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## Preferred Rewards

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## Your Rewards Money Market Sav Preferred Rewards Platinum Honors

for November 24, 2016 to December 23, 2016

Account number: 5922

MARIE T CAMPANELLA

### Account summary

Beginning balance on November 24, 2016	\$129,152.16
Deposits and other additions	14,355.03
Withdrawals and other subtractions	-42,000.00
Service fees	-0.00
<b>Ending balance on December 23, 2016</b>	<b>\$101,507.19</b>

Annual Percentage Yield Earned this statement period: 0.06%.  
Interest Paid Year To Date: \$44.10.

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SSM-08-16-00968 | ARJ6MTK4



## Your savings account

MARIE T CAMPANELLA | Account # 7922 | November 24, 2016 to December 23, 2016

### Deposits and other additions

Date	Description	Amount
12/05/16	Online Banking transfer from CHK 2412 Confirmation# 1496424419	350.00
12/07/16	Online Banking transfer from CHK 1159 Confirmation# 2411153479	14,000.00
12/23/16	Interest Earned	5.03
<b>Total deposits and other additions</b>		<b>\$14,355.03</b>

### Withdrawals and other subtractions

Date	Description	Amount
11/29/16	Online Banking transfer to CHK 1159 Confirmation# 2444301305	-42,000.00
<b>Total withdrawals and other subtractions</b>		<b>-\$42,000.00</b>

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SSM-09-16-0091.B | ARFPV669

5:44 PM

**Nicholas V. Campanella or Marie Campanella**

06/15/17

**Profit & Loss**

Accrual Basis

November 24 through December 23, 2016

	Nov 24 - Dec 23, 16
Ordinary Income/Expense	
Income	
Interest Income	5.03
Other Income	17,240.00
Phoenix Medical Director - Fees	950.24
Salary - Pilgrim Medical Center	11,531.72
Total Income	29,726.99
Gross Profit	29,726.99
Expense	
Charitable Contributions	450.00
Food, Clothing, Hygiene	
Clothing	212.42
Food	831.01
Hygiene	234.00
Total Food, Clothing, Hygiene	1,277.43
Interest Expense	
LOC	588.81
Total Interest Expense	588.81
Loan Receivable - Pilgrim Medic	9,000.00
Meals and Entertainment	207.94
Medical Expenses	179.68
Mortgage - M&T Bank	7,465.79
Personal Gifts	42,555.52
Rental Expense	285.00
Travel Expense	119.20
Utilities	883.86
Total Expense	63,013.23
Net Ordinary Income	-33,286.24
Net Income	-33,286.24

# Payroll Details

Hours and Earnings			Taxes		Deductions		Employer	
SSN	Prod	Rate	Amount	Pay	Amount	Net Pay	Liability	Amount
<b>Pay Frequency: Biweekly</b>								
<b>Department: 800 - Staff</b>								
<b>Employee: Campanella, Marie</b>								
Regular		0.00	16,000.00	FED FIT	3,294.74	11,531.72	FED MEDCARE-ER	232.00
		0.00	16,000.00	FED	232.00			232.00
				MEDCARE				
				NJ SIT	941.54			
					4,468.28			
Check Date: 11/30/2016 / Direct Deposit / Checking / Account No: XXXXXXXX1159 \$5,765.86								
Check Date: 12/14/2016 / Direct Deposit / Checking / Account No: XXXXXXXX1159 \$5,765.86								
<b>Department Totals: 800 - Staff</b>								
Regular		0.00	\$16,000.00	FED FIT	\$3,294.74	\$11,531.72	FED MEDCARE-ER	\$232.00
		0.00	\$16,000.00	FED	\$232.00			\$232.00
				MEDCARE				
				NJ SIT	\$941.54			
					\$4,468.28			
<b>Total Employees - 800 - Staff: 1</b>								
<b>Pay Frequency Totals: Biweekly</b>								
Regular		0.00	\$16,000.00	FED FIT	\$3,294.74	\$11,531.72	FED MEDCARE-ER	\$232.00
		0.00	\$16,000.00	FED	\$232.00			\$232.00
				MEDCARE				
				NJ SIT	\$941.54			
					\$4,468.28			
<b>Total Employees - Biweekly: 1</b>								
<b>Company Totals:</b>								
Regular		0.00	\$16,000.00	FED FIT	\$3,294.74	\$11,531.72	FED MEDCARE-ER	\$232.00
		0.00	\$16,000.00	FED	\$232.00			\$232.00
				MEDCARE				
				NJ SIT	\$941.54			
					\$4,468.28			
<b>Total Employees - Company: 1</b>								